

Please type a plus sign (+) inside this box →



PTO/SB/21 (6-99)

Approved for use through 09/30/2000. OMB 0651-0031

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission	19	Application Number	10/574,373
		Filing Date	MARCH 31, 2006
		First Named Inventor	DIRK BOECKER
		Group/Art Unit	UNASSIGNED
		Examiner Name	UNASSIGNED
		Attorney Docket Number	38187-2840

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Copy of Assignment	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Amendment Under 37 CFR §1.48(b)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Version With Markings Showing Changes	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, by Assignee to Exclusion of Inventor Under 37 C.F.R. §3.71 With Revocation of Prior Powers	<input type="checkbox"/> Additional Enclosure(s) <i>(Please Identify Below):</i>
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/>
<input checked="" type="checkbox"/> INFORMATION DISCLOSURE STATEMENT WITH FORM PTO-1449 (2 REFERENCES)	<input type="checkbox"/> Small Entity Statement	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
<input type="checkbox"/> Copy of Notice		

Remarks

AUTHORIZATION TO CHARGE DEPOSIT ACCOUNT 07-1700 FOR ANY FEES DUE IN CONNECTION WITH THIS PAPER, REFERENCING ATTORNEY'S DOCKET NO. 38187-2840.

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT

Firm or Individual name	GOODWIN PROCTER LLP	PAUL DAVIS (Reg. No. 29,294)
	135 Commonwealth Drive, Menlo Park, California 94025	Telephone: (650) 752-3100 Facsimile: (650) 853-1038
Signature		
Date	APRIL 17, 2008	Customer Number: 77845

**FILED VIA EFS
ON APRIL 17, 2008**

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop _____, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.